EAST Search History

Ref #	Hits	Search Query	DBs	Default Operator	Plurals	Time Stamp
L1	197	norfluoxetine	US-PGPUB; USPAT; EPO; JPO; DERWENT; IBM_TDB	OR	ON	2007/10/18 09:40
L2	2	"4584404".pn.	US-PGPUB; USPAT; EPO; JPO; DERWENT; IBM_TDB	OR	ON	2007/10/18 09:24
L3	2	"7034059".pn.	US-PGPUB; USPAT; EPO; JPO; DERWENT; IBM_TDB	OR	ON	2007/10/18 09:24
L4	1474	514/649.ccls.	US-PGPUB; USPAT; EPO; JPO; DERWENT; IBM_TDB	OR	ON	2007/10/18 09:24
L5	2	"4683235".pn.	US-PGPUB; USPAT; EPO; JPO; DERWENT; IBM_TDB	OR	ON	2007/10/18 09:40

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NEWS 1		Web Page for STN Seminar Schedule - N. America
NEWS 2	JUL 02	LMEDLINE coverage updated
NEWS 3	JUL 02	SCISEARCH enhanced with complete author names
NEWS 4	JUL 02	CHEMCATS accession numbers revised
NEWS 5	JUL 02	CA/CAplus enhanced with utility model patents from China
NEWS 6	JUL 16	CAplus enhanced with French and German abstracts
NEWS 7	JUL 18	CA/CAplus patent coverage enhanced
NEWS 8	JUL 26	USPATFULL/USPAT2 enhanced with IPC reclassification
NEWS 9	JUL 30	USGENE now available on STN
NEWS 10	AUG 06	CAS REGISTRY enhanced with new experimental property tags
NEWS 11	AUG 06	BEILSTEIN updated with new compounds
NEWS 12	AUG 06	FSTA enhanced with new thesaurus edition
NEWS 13	AUG 13	CA/CAplus enhanced with additional kind codes for granted patents
NEWS 14	AUG 20	CA/CAplus enhanced with CAS indexing in pre-1907 records
NEWS 15	AUG 27	Full-text patent databases enhanced with predefined patent family display formats from INPADOCDB
NEWS 16	AUG 27	USPATOLD now available on STN
NEWS 17	AUG 28	CAS REGISTRY enhanced with additional experimental spectral property data
NEWS 18	SEP 07	STN AnaVist, Version 2.0, now available with Derwent World Patents Index
NEWS 19	SEP 13	FORIS renamed to SOFIS
NEWS 20	SEP 13	INPADOCDB enhanced with monthly SDI frequency
NEWS 21	SEP 17	CA/CAplus enhanced with printed CA page images from 1967-1998
NEWS 22	SEP 17	CAplus coverage extended to include traditional medicine patents
NEWS 23	SEP 24	EMBASE, EMBAL, and LEMBASE reloaded with enhancements
NEWS 24	OCT 02	CA/CAplus enhanced with pre-1907 records from Chemisches Zentralblatt

NEWS EXPRESS 19 SEPTEMBER 2007: CURRENT WINDOWS VERSION IS V8.2, CURRENT MACINTOSH VERSION IS V6.0c(ENG) AND V6.0Jc(JP), AND CURRENT DISCOVER FILE IS DATED 19 SEPTEMBER 2007.

NEWS HOURS	STN Operating Hours Plus Help Desk Availability
NEWS LOGIN	Welcome Banner and News Items
NEWS IPC8	For general information regarding STN implementation of IPC 8

Enter NEWS followed by the item number or name to see news on that specific topic.

* * * * * * * * * * * * * * * * STN Columbus * * * * * * * * * * * * * * * *

FILE 'HOME' ENTERED AT 11:10:24 ON 18 OCT 2007

=> fil reg
COST IN U.S. DOLLARS

	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	0.63	0.63

FILE 'REGISTRY' ENTERED AT 11:12:24 ON 18 OCT 2007
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STRUCTURE FILE UPDATES: 17 OCT 2007 HIGHEST RN 950885-37-7
DICTIONARY FILE UPDATES: 17 OCT 2007 HIGHEST RN 950885-37-7

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on property searching in REGISTRY, refer to:

http://www.cas.org/support/stngen/stndoc/properties.html

=> s tamsulosin/cn
L1 1 TAMSULOSIN/CN

=> fil capl
COST IN U.S. DOLLARS

	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	5.40	6.03

FILE 'CAPLUS' ENTERED AT 11:12:36 ON 18 OCT 2007
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FILE COVERS 1907 - 18 Oct 2007 VOL 147 ISS 17
FILE LAST UPDATED: 17 Oct 2007 (20071017/ED)

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They are available for your review at:

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=> s l1
L2 520 L1

=> s l2 and prostatitis
1391 PROSTATITIS
L3 8 L2 AND PROSTATITIS

=> d ibib abs 7-8

L3 ANSWER 7 OF 8 CAPLUS COPYRIGHT 2007 ACS on STN
ACCESSION NUMBER: 2002:659566 CAPLUS
DOCUMENT NUMBER: 137:194891
TITLE: Tamsulosin: a review of its pharmacology and therapeutic efficacy in the management of lower urinary tract symptoms
AUTHOR(S): Dunn, Christopher J.; Matheson, Anna; Faulds, Diana M.
CORPORATE SOURCE: Adis International Limited, Auckland, N. Z.
SOURCE: Drugs & Aging (2002), 19(2), 135-161
CODEN: DRAGE6; ISSN: 1170-229X
PUBLISHER: Adis International Ltd.
DOCUMENT TYPE: Journal; General Review
LANGUAGE: English
AB A review. Tamsulosin is a subtype-selective α1A- and α1D-adrenoceptor antagonist. α1-Receptors predominate in the prostate gland, prostatic capsule, prostatic urethra and bladder, and the relaxation of prostate and bladder smooth muscles is associated with improved maximal urine flow (Qmax) and alleviation of lower urinary tract symptoms (LUTS) in patients with benign prostatic hyperplasia (BPH). Tamsulosin 0.4mg once daily in a modified-release formulation increased Qmax and improved symptom scores relative to baseline to a greater extent than placebo in 12- and 13-wk double-blind, randomized, multicenter, clin. trials in patients with LUTS, with statistical significance between treatments for Qmax values in two of three published US and European studies. Tamsulosin is effective in patients with mild to severe LUTS associated with BPH, in patients with diabetes mellitus and in the elderly, and does not interfere with concomitant anti-hypertensive therapy. Pooled data based on patients receiving tamsulosin 0.4 or 0.8mg once daily indicate maintenance of efficacy for up to 6 yr. Tamsulosin 0.4mg once daily was of similar efficacy to alfuzosin 2.5mg three times daily, with less tendency to cause hypotensive effects, in a double-blind, randomized 12-wk trial. Benefit of the drug has also been shown in patients with acute urinary retention or chronic abacterial prostatitis, those receiving high energy transurethral microwave thermo-therapy, and in patients with prostate cancer with radiation-induced urethritis. Dizziness and abnormal ejaculation are stated to be the most common adverse events, with asthenia, postural hypotension and palpitations being seen less frequently (1 to 2% incidence), in patients receiving tamsulosin 0.4mg once daily. Tamsulosin has not been associated with clin. significant changes in blood pressure in clin. trials. Conclusion: The α1A- and α1D-adrenoceptor antagonist tamsulosin, given at a dosage of 0.4mg once daily in a modified-release formulation, is effective and well tolerated in the treatment of LUTS associated with BPH. Although the drug has been directly compared to date with one other agent only, data show overall that tamsulosin clearly offers advantages over other α1-adrenoceptor antagonists in terms of the need for a single daily dose only, and its low potential for hypotensive effects or interference with concomitant antihypertensive therapy. Dosage titration at the start of treatment is not necessary. Tamsulosin has a rapid onset of action and is effective in patients with moderate or severe symptoms. The drug is therefore a valuable therapeutic option, with both demonstrated and potential advantages over older nonselective agents, in the management of patients with LUTS associated with BPH.
REFERENCE COUNT: 125 THERE ARE 125 CITED REFERENCES AVAILABLE FOR

THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L3 ANSWER 8 OF 8 CAPLUS COPYRIGHT 2007 ACS on STN
ACCESSION NUMBER: 1999:626075 CAPLUS
DOCUMENT NUMBER: 131:252591
TITLE: Combination of α1-adrenoceptor antagonists and endothelin antagonists for the treatment of benign prostatic hyperplasia
INVENTOR(S): Broten, Theodore P.; Siegl, Peter K. S.; Nichtberger, Steven A.
PATENT ASSIGNEE(S): Merck & Co., Inc., USA
SOURCE: PCT Int. Appl., 45 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9948530	A1	19990930	WO 1999-US6014	19990319
W: AE, AL, AM, AU, AZ, BA, BB, BG, BR, BY, CA, CN, CU, CZ, EE, GD, GE, HR, HU, ID, IL, IN, IS, JP, KG, KR, KZ, LC, LK, LR, LT, LV, MD, MG, MK, MN, MX, NO, NZ, PL, RO, RU, SG, SI, SK, SL, TJ, TM, TR, TT, UA, US, UZ, VN, YU, ZA, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SL, SZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 9930112	A	19991018	AU 1999-30112	19990319
US 6410554	B1	20020625	US 1999-274839	19990323
PRIORITY APPLN. INFO.:			US 1998-79041P	P 19980323
			GB 1998-10895	A 19980520
			WO 1999-US6014	W 19990319

AB A pharmaceutical composition for the treatment of benign prostatic hyperplasia comprises an αla-adrenoceptor antagonist, a non-selective endothelin antagonist, and optionally a 5α-reductase inhibitor. The combination therapy improves lower urinary tract symptoms including increasing urine flow rate, decreasing residual urine volume and improving overall obstructive and irritative symptoms in patients with benign prostatic hyperplasia or symptomatic prostatism. The efficacy of endothelin antagonists and αla-adrenoceptor antagonists for inhibition of ET-1 and α1-adrenoceptor-mediated prosthetic urethral contractions was tested in a mongrel dog model. The preparation of the αla-adrenoceptor antagonist trans-(+)-4-(3,4-difluorophenyl)-5-methyl-2-oxo-oxazolidine-3-carboxylic acid [3-[4-(4-fluorophenyl)-piperidin-1-yl]propyl]amide is presented.
REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> FIL STNGUIDE

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	8.14	14.17

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE ENTRY	TOTAL SESSION
CA SUBSCRIBER PRICE	-1.56	-1.56

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FILE CONTAINS CURRENT INFORMATION.

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LAST RELOADED: Oct 12, 2007 (20071012/UP).

=> s l2 and bph
'CN' IS NOT A VALID FIELD CODE
             0 TAMSULOSIN/CN
             0 BPH
L4           0 L2 AND BPH

=> log h
COST IN U.S. DOLLARS                                SINCE FILE      TOTAL
                                                       ENTRY    SESSION
FULL ESTIMATED COST                                     0.42      14.59

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)          SINCE FILE      TOTAL
                                                       ENTRY    SESSION
CA SUBSCRIBER PRICE                                     0.00      -1.56

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